

Report Date: 02 Feb 2013

Summary Report for Individual Task
081-833-0210
APPLY A TOURNIQUET TO CONTROL BLEEDING
Status: Approved

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Condition: You have encountered a casualty who is bleeding profusely from an extremity and needs a tourniquet to control the bleeding. All other more serious injuries have been assessed and treated. You will need an emergency bandage, clean cloth or sterile dressing, plastic, container, cravats, marker, DD Form 1380 (Field Medical Card (FMC)), and materials to improvise a tourniquet or a combat application tourniquet (C.A.T.). You are not in a CBRNE environment. This task should not be trained in MOPP.

Standard: Control the bleeding from the extremity without causing further harm to the casualty.

Special Condition: None

Special Standards: None

Special Equipment: None

MOPP: Never

Task Statements

Cue: None

DANGER

None

WARNING

None

CAUTION

All body fluids should be considered potentially infectious. Always observe body substance isolation (BSI) precautions by wearing gloves and eye protection as a minimal standard of protection.
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Remarks: None

Notes: None

Performance Steps

1. Determine if the bleeding is life-threatening.

CAUTION

Under combat conditions, while under effective enemy fire, a temporary tourniquet may often be the primary means to control bleeding. A properly applied tourniquet will quickly control life-threatening hemorrhage until the casualty can be moved away from the effective fire.

2. Apply a tourniquet if direct pressure and the emergency bandage fail to control the bleeding. (See task 081-833-0161.)

- a. Improvised tourniquet.

- (1) Apply pressure to pressure point above the wound.
- (2) Prepare equipment.
- (3) Take BSI.
- (4) Expose the wound.
- (5) Place the prepared cravat and windlass 2-3 inches above the wound (not over a joint) and secure the cravat tightly against the extremity with a full non-slip knot.
- (6) Twist the windlass until the bleeding stops.
- (7) While holding tension on the windlass, place the windlass inside the half knot of the second cravat proximal to the tourniquet (if possible).
- (8) Tighten the second cravat around windlass and secure the second cravat to the extremity with a full non-slip knot.
- (9) Assess for the absence of a distal pulse (not indicated for amputations).
- (10) Place a "T" and the time of application on the casualty.
- (11) Secure the tourniquet in place with tape.

- b. C-A-T. (NSN 6515-01-521-7976.)

- (1) Apply pressure to pressure point above the wound.
- (2) Take BSI.
- (3) Expose the wound enough to ensure the tourniquet is placed above the injury.
- (4) Place C.A.T. between the heart and the wound on the injured extremity, 2-3 inches above the wound.
- (5) Pull the free end of the self adhering band through the buckle and route through the friction adapter buckle (it is not necessary to route through friction adapter on an arm wound).

(6) Pull the self adhering band tight around the extremity and fasten it back on itself.

(7) Twist the windlass until the bleeding stops.

(8) Lock the windlass in place within the windlass clip.

(9) Secure the windlass with the windlass strap.

(10) Assess for the absence of a distal pulse (not indicated for amputations).

(11) Place a "T" and the time of application on the casualty.

(12) Secure the C.A.T. in place with tape.

3. Record the treatment on the FMC.

4. Reassess the injury to ensure bleeding has been controlled.

5. If the source of bleeding was due to a traumatic amputation--

a. Wrap the amputated part in a clean cloth or sterile dressing (if available).

b. Wrap or bag the amputated part in plastic.

c. Label the plastic bag with the casualty's information.

CAUTION

Do not place the amputated part directly in contact with ice. Do not submerge the part directly in water. Do not allow the part to freeze.

d. Transport the amputated part in a cool container (if available) with the casualty.

6. Evacuate the casualty.

(Asterisks indicates a leader performance step.)

Evaluation Preparation:

Setup: For training and evaluation, have another Soldier act as the casualty. Have an emergency bandage, cravats, materials to improvise a tourniquet or a combat application tourniquet present. After the emergency bandage is applied, tell the Soldier that bleeding is not controlled. Once the tourniquet (improvise or C.A.T.) has been applied and the windlass device has been tightened, tell the Soldier that the bleeding has stopped. Tell the casualty not to assist the Soldier in any way.

CAUTION: Do not allow the Soldier to fully tighten the windlass on the tourniquet.

Brief the Soldier: Tell the Soldier to control the bleeding from a casualty's extremity.

PERFORMANCE MEASURES	GO	NO-GO	N/A
1. Determined if the bleeding was life threatening.			
2. Applied direct pressure and a pressure dressing to the wound with an emergency bandage.			
3. Applied an improvised tourniquet or C.A.T.			
4. Recorded the treatment on the FMC.			
5. Reassessed the injury to ensure bleeding was controlled.			
6. Evacuated the casualty.			
7. Caused no further injury to the casualty.			

Supporting Reference(s):

Step Number	Reference ID	Reference Name	Required	Primary
	0-7637-4738-6	AAOS, Emergency Care and Transportation of the Sick and Injured, 9th Edition, Jones & Bartlett Publishers	No	No
	DD FORM 1380	US Field Medical Card	Yes	No
	PHTLS	NAEMT, PHTLS: Basic And Advanced Prehospital Trauma Life Support (Military Version), 5th Edition, Mosby-Year Book (ISBN: 0-32303-271-0)	No	No

Environment: Environmental protection is not just the law but the right thing to do. It is a continual process and starts with deliberate planning. Always be alert to ways to protect our environment during training and missions. In doing so, you will contribute to the sustainment of our training resources while protecting people and the environment from harmful effects. Refer to FM 3-34.5 Environmental Considerations and GTA 05-08-002 ENVIRONMENTAL-RELATED RISK ASSESSMENT.

Safety: In a training environment, leaders must perform a risk assessment in accordance with FM 5-19, Composite Risk Management. Leaders will complete a DA Form 7566 COMPOSITE RISK MANAGEMENT WORKSHEET during the planning and completion of each task and sub-task by assessing mission, enemy, terrain and weather, troops and support available-time available and civil considerations, (METT-TC). Note: During MOPP training, leaders must ensure personnel are monitored for potential heat injury. Local policies and procedures must be followed during times of increased heat category in order to avoid heat related injury. Consider the MOPP work/rest cycles and water replacement guidelines IAW FM 3-11.4, NBC Protection, FM 3-11.5, CBRN Decontamination. In a training environment, leaders must perform a risk assessment in accordance with FM 5-19, Composite Risk Management. Leaders will complete a DA Form 7566 COMPOSITE RISK MANAGEMENT WORKSHEET during the planning and completion of each task and sub-task by assessing mission, enemy, terrain and weather, troops and support available-time available and civil considerations, (METT-TC). Note: During MOPP training, leaders must ensure personnel are monitored for potential heat injury. Local policies and procedures must be followed during times of increased heat category in order to avoid heat related injury. Consider the MOPP work/rest cycles and water replacement guidelines IAW FM 3-11.4, NBC Protection, FM 3-11.5, CBRN Decontamination.

Prerequisite Individual Tasks : None

Supporting Individual Tasks : None

Supported Individual Tasks : None

Supported Collective Tasks : None

ICTL Data :

ICTL Title	Personnel Type	MOS Data
91W - Health Care Specialist - SL1		
68W - Health Care Specialist - SL1	Enlisted	MOS: 68W, Skill Level: SL1